

President's Report

We have had another tremendous year for our Great Lakes Chapter of ACHE. Our colleagues continue to find value in our chapter as evidenced by another strong year in event attendance, membership growth, and increasing interests of members pursuing the fellowship status. Our vision to be the premier professional society for healthcare leaders dedicated to improving healthcare is our commitment to each of you. As we approach 2014, the chapter board and committees will ensure that we provide you with membership value through quality programs and networking opportunities. As we conclude the year, I want to highlight and recognize the following accomplishments in 2013.

- In 2013, our chapter had over 395 participants in our education and networking events; had 87 new members join the chapter; and 11 members successfully achieved fellow status (FACHE).
- Special thank you to Rick Wright, McLaren of Greater Lansing, and Paul Spaude, Borgess, for leading our CEO Luncheons this past year.
- It was a pleasure to have a joint meeting with the Michigan Healthcare Planning and Strategy Association (MHPSA) on October 11th with over 100 participants from both GLACHE and MHPSA. It was an excellent collaboration between the two healthcare associations.
- I am pleased to announce that the Regent election results were approved and Tina Freese-Decker was elected Regent for Michigan and Northwest Ohio. We are excited to have a representative of the Great Lakes Chapter to serve as our Regent for the next few years. Congratulations to Tina for her new leadership role with ACHE.
- Congratulations to Kira Carter-Robertson, FACHE, Tom Lemon, FACHE and Donald Sibery, FACHE, for receiving the 2013 ACHE Service Award. This award recognizes their commitment to the healthcare leadership and their volunteerism with ACHE at the national and local level.
- Welcome to our new and re-elected 2013 board members: Steve Berkshire, FACHE, Dan Borton, FACHE, Ray Breiding, FACHE, Michael Breon, Kira Carter-Robertson, FACHE, Pat Hatcher, FACHE, Derk Pronger, FACHE, Martha Richards, Don Simila, FACHE, and Marilyn Skrocki. We appreciate your willingness to accept this leadership role with our chapter.
- Scott Newell, FACHE, and Kevin Price, FACHE, have been elected to serve as our new Chapter President and Chapter Vice President. They will begin a two-year term in 2014. Also, I would like to thank Scott Newell for his role as our Chapter Vice President these past two years. His contributions are appreciated.

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- I want to provide a special thank you to Peter Karadjoff, FACHE, for his support and direction these past 3 years as our Regent. We appreciate all you have done for the Great Lakes Chapter.
- I would like to welcome Mark Sequin, student representative, Saginaw Valley State University. The GLACHE Board remains committed to having student representation from each learning institution in the chapter. We look forward to his involvement with the board as we continue to connect with our future leaders of healthcare.
- Lastly, thank you to our corporate sponsor, Emergency Physician Medical Group (EPMG) for their support throughout the year.

If you are interested in joining a committee or learning more about our Great Lakes Chapter, please contact me at patrick.brillantes@sparrow.org.

**Patrick J. Brillantes, FACHE, Sparrow Health System
GLACHE President**

Regent's Report



Patient Engagement is More than a Survey

I had the opportunity to attend Crain's Health Care Leadership Summit and hear Maureen Bisognano, CEO, Institute for Healthcare Improvement, and author of *Pursuing the Triple Aim* discuss the "next blockbuster drug" that will impact our health system, patient engagement. Maureen described the shift that we will need to make in our approach to patients and medicine to effectively achieve the triple aim goals to: improve population health, improve patient care experience, and reduce per capita cost. Making the patient the "captain of the healthcare team" as she stated sounds like a cliché, though we tend to use silo thinking and a silo-ed system (PCP, specialist, hospital) to categorize a patient and their condition. Maureen pointed out that we need to shift from asking "what is the matter with you" to "what matters to you". Why is that important?

My take is that in order to get patients to comply with medical recommendations to change lifestyle, consistently purchase and take prescribed medication, and to take control of their health it is critical to relate it to their personal priorities. We are developing many new tools (information systems) and resources (care coordinators) to manage population health and the healthcare continuum, though *will what we are doing make the triple aim difference?* If we and our physician organizations do not deliver high quality/low cost care, purchasers will know because of new data transparency, and your organization may not survive. We need to get the captain to take charge.

The patient is the captain, and Maureen gave a great example. In the course of a year, a person with a chronic disease may have 10 hours of encounters with the health system, while they will spend 5,000 waking hours dealing with their disease on their own. We need connect with the person who is the patient/captain to better leverage that 10 hours of encounters to effect the other 5,000 hours of their life that really impact *their* health, the cost to treat *them*, and *your* organizations new performance measures.

Peter Karadjoff, FACHE, Regent for Michigan

Great Lakes Chapter of the American College of Healthcare Executives

Education Report

The Education Committee provided five education programs offering a total of 28.5 Face-to-Face credits. We held two CEO Luncheons, held four networking events including the MHA breakfast meeting, three programs were held in collaboration with other organizations and we had seven C-Suite executives participate in panel discussions. The total number of participants in programs this year was 470. The committee is still working on finalizing the schedule for 2014.

The Education Committee of the GLACHE is always looking for feedback on our programs and new ideas for educational sessions that we can bring to the healthcare leaders in Michigan. If you have any comments, questions or suggestions, please feel free to email Pat Hatcher at Patrice.Hatcher@mclaren.org.

**Patrice Hatcher, MSA, FACHE, McLaren Health Care
Education Chair**

Welcome New Members to the Great Lakes Chapter

September

Mark A. Clark, Portage
Kenneth Fawcett Jr., MD, Grand Rapids
Julie Helm, Grand Rapids
Oussama Itani, MD, Kalamazoo

November

Karlis Austrins, DO, East Lansing
Wendy Boersma, Battle Creek
Julie Gaberdiel, Roscommon
Crystal N. Gaylord, RN, Byron Center
George A. Hunter, Jackson
Jamie J. Iedema, Jenison
Roger Jonsen, Grand Rapids
Ashley Verner, Saginaw

October

Lindiwe M. Helm, DHA, Lansing
Karen Kueny, RN, Whitehall
Bradley E. Tucker, Bay City

December

Brad Blaker, DO, Goodrich

Congratulations to the Following Chapter Members for the Recent Accomplishments

CONGRATULATIONS TO NEW FELLOWS:

October

Linda D. Buckingham, FACHE, Lansing
Linda S. Joel, FACHE, Grand Rapids

November

Joseph Klesney, FACHE, Zeeland

Great Lakes Chapter of the American College of Healthcare Executives

RECOGNIZING RECERTIFIED FELLOWS:

September

Edward G. Dornoff, FACHE, Kalamazoo

Alfred E. Pilong Jr., FACHE, Traverse City

October

Kevin J. Arnold, FACHE, Caledonia

David S. Graser, FACHE, Marquette

Derk F. Pronger, FACHE, Traverse City

Eileen M. Willits, FACHE, Saint Joseph

Members Who Recently Passed the Board of Governors Exam

September

Karen Pakkala, Grand Rapids

November

Duane C. Miller, Carson City

Georgette R. Russell, Carson City

Mark A. Santamaria, Alma

Articles of Interest

Lead by Example: Know the Qualities of a Good Leader

Becoming a leader requires that you understand the roles and responsibilities of leadership and that you practice the qualities of a good leader until you begin to emerge as a leader in your personal and professional life.

You are always free to choose and have the ability to choose, to take command and to assume a leadership role in your life through several different leadership styles. In fact, your life is the result of the choices and decisions you have made up until this moment. Leaders are those who make better choices and decisions than others more often than not, and choose to lead by example.

3 Different Leadership Styles

The good news about leaders is that they are made, not born. Leaders are largely self-made as the result of continuously working on themselves over the years. No one starts off as a leader, but you can aspire to leadership by learning the qualities of a good leader and how they think and feel, and then by emulating them until you become one yourself.

Position Power

There are three major forms of leadership styles in our society today. The first is position power. Position power refers to the powers of rewarding and punishing that go with a particular title or role.

If you are made operations manager or vice president of development, you have the power to hire and fire people, to raise their pay or leave it where it is. You have the power to hand out privileges or punishment and to alter the terms and conditions of employment to make them more or less agreeable. But whoever has your title has those powers. They are conferred upon you by the title itself. They go with the position.

Great Lakes Chapter of the American College of Healthcare Executives

Expert Power

The second type of power is expert power. Expert power arises when you are very good at what you do and as a result, people defer to your opinion and your judgment. Experts in critical areas for the survival or growth of organizations have tremendous power, even though they may have no staff at all. Their decisions and their judgment carry a tremendous weight.

One of the most important decisions you make during the course of your working life is to develop expert power in what you do. By becoming exceptional in your area of expertise, you develop power out of all proportion to your position or title. The most respected and valued people in any organization are those who have developed the ability to make the most valuable and most consistent contributions to the business. By being excellent at what you do, you set up a force field of energy that attracts power and respect to you.

Ascribed Power

The third form of power in organizations is called ascribed power. This is power that is conferred upon you by other people because they like you, trust you, believe in you and want you to have more influence and authority.

Ascribed power is a combination of being very good at what you do, being likable, being results-oriented and being perceived as the kind of person who can be the most helpful to others in achieving their individual goals.

The effective leader always begins with the “needs” of the situation. The effective leader always asks, “What does this situation most require of me? What am I most uniquely capable of contributing to this organization? Of all the things that I can bring to this organization, what are the one or two things that I and only I can do that will make a difference?”

Have a Vision, Make a Difference and Lead by Example

The most common characteristic of leadership, throughout the ages, is that leaders have “vision.” Leaders can see the big picture. Leaders can project forward three to five years and imagine clearly where they want to take the organization and what it will look like when they get there.

Leaders have the ability to articulate this vision in such a way that everyone around them can see and understand where they are going. The leader is the person who has the ability to articulate an exciting vision of a compelling future that everyone wants to be a part of.

Perhaps the most compelling vision that you can articulate for the people around you is the decision and determination to “be the best” at whatever you do.

One of the most important qualities of a good leader is for you to lead by example, to be a role model, to be the kind of person that everyone else looks up to and wants to be like. One of the characteristics of leaders is that they carry themselves at all times, even when no one is watching, as if everyone was watching.

—Adapted from “Lead by Example: Know the Qualities of a Good Leader” by Brian Tracy International, www.briantracy.com

Great Lakes Chapter of the American College of Healthcare Executives

Prep to Present to the C-Suite or the Board

Presenting to a group of executives or your organization's board of trustees doesn't have to be terrifying. Follow these tips to impress even the most intimidating top-level execs:

- *Stay focused.* Don't attempt to wow executives by covering every great idea you have. Answer specific requests succinctly but thoroughly. Concentrate on a few key takeaways and nothing more. If you are asked to present on something specific, do that.
- *Expect interruptions.* Powerful people are busy and may be pulled out of the discussion as urgent issues pop up. Prepare material for just half the time you are allotted. If you are scheduled 30 minutes, create a 15-minute presentation that you know backwards and forwards. That way you cover key points should interruptions eat up some of your time. If you are lucky enough to experience few or no interruptions, use the rest of the time for Q&A and to clarify any confusion.
- *Plan for every response.* You need to be able to answer every question and respond to every comment quickly and accurately. Study and rehearse to ensure that you present a confident and knowledgeable image.

If possible, meet with a group of colleagues and ask them to drive you with challenging questions so that you can prepare for anything that could potentially come your way.

—Adapted from “5 Ways to Wow Execs—Don’t Get Mad, Get Even More Prepared,” Nancy Duarte, www.linkedin.com.

National News

Register Now for the 2014 Congress on Healthcare Leadership

ACHE's Congress on Healthcare Leadership brings you the best in professional development, exceptional opportunities to network with and learn from peers, and the latest information to enhance your career and address your organization's challenges in innovative ways. The 2014 Congress on Healthcare Leadership, “Where Knowledge, Ideas and Solutions Connect,” will be held March 24–27 at the Hyatt Regency Chicago, and **registration is now open at ache.org/Congress.**

Join us and be part of the dynamic, energizing event that draws world-class speakers and more than 4,000 healthcare leaders from across the nation and around the world.

This premier healthcare leadership event provides:

- Education on current and emerging issues
- More than 140 sessions of practical learning from healthcare's top leaders
- Opportunities to connect with your peers
- Career-enhancement workshops

Call for Innovations for the 2014 Management Innovations Poster Session

ACHE would like to invite authors to submit abstracts of their posters for consideration for the 30th Annual Management Innovations Poster Session to be held at the 2014 Congress on Healthcare Leadership. We are interested in innovations on issues affecting your organization that might be helpful to others, including improving quality or efficiency, improving patient or physician satisfaction, implementation of EHRs, uses of new technology and similar topics. All accepted

Great Lakes Chapter of the American College of Healthcare Executives

applicants will be expected to present their posters on Monday, March 24, 2014, between 7 and 8 a.m., and posters will remain on display at Congress from March 24 – 26.

The top innovations will also be published in the 2014 Management Innovations booklet placed on ache.org. In addition, the participant presenting the innovation judged to be the most creative, broadly applicable and useful to the healthcare management field will receive a Health Administration Press book of his or her choice. Award winners will be announced at the Malcolm T. MacEachern Memorial Lecture and Luncheon on Tuesday, March 25. Visit ache.org/CongressPosterSession for the selection criteria and to submit your one-page abstract by Jan. 21, 2014.

Thomas C. Dolan Executive Diversity Program Scholars Selected

Six scholars have been selected for the inaugural Thomas C. Dolan Executive Diversity Program from a pool of 85 applicants. The year-long program will help further prepare these mid- and senior-level careerists to advance to higher leadership roles. Scholars will benefit from specialized curriculum opportunities addressing barriers in career attainment and developing executive presence, one-on-one interaction with a specially selected mentor and participation in formal leadership education and career assessments. The scholars and their respective organizations are:

- **Leslie Burnside**, system director, network development & physician relations, UNC Health Care, Chapel Hill, N.C.
- **Jaquette B. Clemons, DrPH**, system director, community health/benefit, CHRISTUS Health System, Irving, Texas
- **Heriberto “Eddie” Cruz**, vice president, operations, Access Community Health Network, Chicago

- **Gayathri S. Jith, FACHE**, senior vice president, strategy and operations, Valley Presbyterian Hospital, Van Nuys, Calif.
- **Jan Manary, RN**, Captain, Nurse Corps, U.S. Navy, Reserve Component, Arlington, Va.
- **Patrick Ramirez**, administrative director, UCSF Medical Center, San Francisco

“This is an impressive group of healthcare executives to compose our inaugural cohort,” says ACHE President and CEO Deborah J. Bowen, FACHE, CAE. “We are confident these scholars will not only benefit from the program offerings but will make strong contributions to healthcare as they advance in their careers.”

The Thomas C. Dolan Executive Diversity Program was established by the Foundation of the American College of Healthcare Executives to honor Dolan, who served as president and CEO of ACHE from 1991-2013, for his long-standing service to the profession of healthcare leadership and to further his strong commitment to achieving greater diversity among senior healthcare leaders. Scholars will receive tuition to attend ACHE’s most notable educational offerings, including the 2014 Senior Executive Program or Executive Program and ACHE’s 2014 Congress on Healthcare Leadership. Enhanced self-awareness, critical leadership skills and an expanded network of leaders will prepare scholars for their future roles.

“ACHE is pleased there has been tremendous interest in and support for the Thomas C. Dolan Executive Diversity program,” says Bowen. “We are thrilled to be able to expand our support to diversify the leadership ranks in healthcare, and we are enormously grateful to the community of ACHE leaders that supports this program and made this possible.”

For more information about the selected scholars and the Executive Diversity Program, visit ache.org/ExecutiveDiversity.

Great Lakes Chapter of the American College of Healthcare Executives

ACHE Nominating Committee 2014 Slate

The ACHE Nominating Committee has agreed on a slate to be presented to the Council of Regents on March 22, 2014, at the Council of Regents meeting in Chicago. All nominees have been notified and have agreed to serve if elected. All terms begin at the close of the Council meeting on March 22. The 2014 slate is as follows:

Nominating Committee Member, District 1 (two-year term ending in 2016)

Cheray T. Burnett, FACHE
Vice President
St. John's Riverside Hospital
Yonkers, N.Y.

Nominating Committee Member, District 4 (two-year term ending in 2016)

Fred B. Hood, FACHE
Administrator
North Mississippi Medical Center-Pontotoc
Pontotoc, Miss.

Nominating Committee Member, District 5 (two-year term ending in 2016)

Ted W. Hirsch, FACHE
Senior Executive Officer
Kalispell Regional Medical Center
Kalispell, Mont.

Governor (three-year term ending in 2017)

James W. Connolly, FACHE
President and CEO
Ellis Medicine
Schenectady, N.Y.

Governor (three-year term ending in 2017)

David A. Olson, FACHE
Chief Strategy Officer
Froedtert Health
Milwaukee

Governor (three-year term ending in 2017)

Charles D. Stokes, FACHE
COO
Memorial Hermann Healthcare System
Houston

Governor (three-year term ending in 2017)

Christine C. Winn, FACHE
Executive Director
Cooper University Health Care
Camden, N.J.

Chairman-Elect

Richard D. Cordova, FACHE
President and CEO
Children's Hospital Los Angeles
Los Angeles

Additional nominations for members of the Nominating Committee may be made from the floor at the annual Council of Regents meeting. Additional nominations for the offices of Chairman-Elect and Governor may be made in the following manner: Any Fellow may be nominated by written petition of at least 15 members of the Council of Regents.

Nominations must be received in the ACHE headquarters office (American College of Healthcare Executives, 1 North Franklin Street, Suite 1700, Chicago, IL 60606-3529) at least 60 days prior to the annual meeting of the Council of Regents. Regents shall be notified in writing of nominations at least 30 days prior to the annual meeting of the Council of Regents.

Thanks to the members of the Nominating Committee for their contributions in this important assignment:

Rulon F. Stacey, PhD, FACHE
Col James J. Burks, FACHE
Gayle L. Capozzalo, FACHE
David D. Clark, FACHE
Thomas S. Elmore, FACHE
Barbara L. Knutzen, FACHE
Cindy J. Rogers, FACHE
Adam K. Weinstein, FACHE

Great Lakes Chapter of the American College of Healthcare Executives

ACHE Call for Nominations for the 2015 Slate

ACHE's 2014–2015 Nominating Committee is calling for applications for service beginning in 2015. All members are encouraged to participate in the nominating process. ACHE Fellows are eligible for any of the Governor and Chairman-Elect vacancies and are eligible for the Nominating Committee vacancies within their district. Open positions on the slate include:

- Nominating Committee Member, District 2 (two-year term ending in 2017)
- Nominating Committee Member, District 3 (two-year term ending in 2017)
- Nominating Committee Member, District 6 (two-year term ending in 2017)
- 4 Governors (three-year terms ending in 2018)
- Chairman-Elect

Please refer to the following district designations for the open positions:

- District 2: District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico, South Carolina, Virginia, West Virginia.
- District 3: Illinois, Indiana, Iowa, Kentucky, Michigan, Minnesota, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin.
- District 6: Uniformed Services/Veterans Affairs.

Candidates for Chairman-Elect and Governor should submit an application to serve, a copy of their resume and up to 10 letters of support. Candidates for the Nominating Committee should only submit a letter of self-nomination and a copy of their resume.

Applications to serve and self-nominations must be submitted electronically to jnolan@ache.org and must be received by July 15, 2014. All correspondence should be addressed to Gayle L. Capozzalo, FACHE, chairman, Nominating Committee, c/o Julie Nolan, American College of Healthcare Executives, 1 N. Franklin St., Ste. 1700, Chicago, IL 60606-3529.

The first meeting of ACHE's 2014–2015 Nominating Committee will be held on Tuesday, March 25, 2014, during the Congress on Healthcare Leadership in Chicago. The committee will be in open session at 2:45 p.m. During the meeting an orientation session will be conducted for potential candidates, giving them the opportunity to ask questions regarding the nominating process. Immediately following the orientation, an open forum will be provided for ACHE members to present and discuss their views of ACHE leadership needs. Following the July 15 submission deadline, the committee will meet to determine which candidates for Chairman-Elect and Governor will be interviewed. All candidates will be notified in writing of the committee's decision by Sept. 30, 2014, and candidates for Chairman-Elect and Governor will be interviewed in person on Oct. 30, 2014.

To review the Candidate Guidelines, visit ache.org/CandidateGuidelines. If you have any questions, please contact Julie Nolan at (312) 424-9367 or jnolan@ache.org.

ACHE Call for Nominations for Regent-at-Large

The ACHE Board of Governors is calling for applications to serve as Regent-at-Large in Districts 2, 3, 4 and 5 beginning in March 2015. ACHE Fellows are eligible for Regent-at-Large vacancies within their district.

- District 2 consists of the District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico, South Carolina, Virginia and West Virginia.
- District 3 consists of Illinois, Indiana, Iowa, Kentucky, Michigan, Nebraska, Minnesota, North Dakota, Ohio, South Dakota and Wisconsin.
- District 4 consists of Alabama, Arkansas, Kansas, Louisiana, Mississippi, Missouri, New Mexico, Oklahoma, Tennessee and Texas.
- District 5 consists of Alaska, Arizona, California, Colorado, Hawaii, Idaho,

Great Lakes Chapter of the American College of Healthcare Executives

Montana, Nevada, Oregon, Utah,
Washington and Wyoming.

The goal of the Board of Governors in appointing Regents-at-Large is for the Council of Regents to mirror the diversity of ACHE Members and Fellows. To that end, the Board seeks applicants who are female or persons of color as these groups are underrepresented on the Council of Regents. The responsibilities of the Regent-at-Large, including suggested knowledge, skills and experience, are included in the position description posted at ache.org/RegentAtLarge. Appointments will be made by the Board of Governors in November 2014. Candidates should not directly contact members of the Board of Governors to request letters of support. Fellows from Districts 2, 3, 4 and 5 may apply to serve by sending a letter (see specifications below) via U.S. mail postmarked between January 1 and July 15 to Thom D. Freyer,

FACHE, CAE, American College of Healthcare Executives, 1 N. Franklin St., Suite 1700, Chicago, IL 60606-3529. Materials can also be sent via email to tfreyer@ache.org or faxed to (312) 424-2836. All candidates will be listed in the Member Center of ache.org under the heading "Regent-at-Large Declared Candidates." Any candidate not listed by July 31 should contact Thom D. Freyer, FACHE, CAE, immediately. If prospective candidates have any questions about the application process, they should contact Thom Freyer.

Application specifications: To be considered, applications must include:

- A statement, in the form of a letter, by the candidate that addresses his or her qualifications for the position, including the characteristics identified by the Board of Governors that are noted above and
- A professional resume of education and work experience

Candidates may include up to two letters of support for their candidacy. Letters of support

may not be solicited from current members of the ACHE Board of Governors.

Thank You to 2013 Premier Corporate Partners

ACHE would like to thank our 2013 Premier Corporate Partners who have all recommitted their support for 2014. Through their support, our Corporate Partners demonstrate commitment to the future of healthcare leadership and improving healthcare delivery. For more information, please visit ache.org/CorporatePartners.

- [ARAMARK Healthcare Technologies](#)
- [Cardinal Health](#)
- [CareFusion](#)
- [Conifer Health Solutions](#)
- [Philips Healthcare](#)
- [Trane Global Healthcare Practice](#)

Apply for a Tuition Waiver

To reduce the barriers to ACHE educational programming for ACHE members experiencing economic hardship, ACHE has established the Tuition Waiver Assistance Program.

ACHE makes available a limited number of tuition waivers to ACHE Members and Fellows whose organizations lack the resources to fund their tuition for education programs. Members and Fellows in career transition are also encouraged to apply. Tuition waivers are based on financial need and are available for the following ACHE education programs:

- Congress on Healthcare Leadership
- Cluster Seminars
- Self-Study Programs
- Online Education Programs
- Online Tutorial (Board of Governors Exam preparation)
- ACHE Board of Governors Exam Review Course

All requests are due no less than eight weeks before the program date, except for ACHE self-study courses; see quarterly application deadlines on the FAQ page of the tuition

Great Lakes Chapter of the American College of Healthcare Executives

waiver application. Incomplete applications and applications received after the deadline will not be considered. Recipients will be notified of the waiver review panel's decision not less than six weeks before the program date. For ACHE self-study courses, applicants will be notified

three weeks after the quarterly application deadline.

If you have questions about the program, please contact Teri Somrak, associate director, Division of Professional Development, at (312) 424-9354 or tsomrak@ache.org. For more information, visit ache.org/TuitionWaiver

ACHE's 2013 Premier Corporate & Valued Sponsors

ACHE would like to recognize our 2013 Premier Corporate Partners, whose year-round support helps ACHE further its mission and adds value to our membership. Our Premier Corporate Partners demonstrate commitment to ACHE and its members in various ways, including providing financial resources, hosting networking events and offering educational opportunities. We are proud to recognize the following 2013 ACHE Premier Corporate Partners:

- ARAMARK Healthcare Technologies
- Cardinal Health
- CareFusion
- Conifer Health Solutions
- Philips Healthcare
- Trane Global Healthcare Practice

MKM architecture + design named to Modern Healthcare Top 100.

MKM architecture + design (MKM) was recently named one of the Top 100 Healthcare Architectural Firms by Modern Healthcare magazine for the seventh year in a row.

MKM is one of only three Indiana-based firms named to this prestigious national list. Each year Modern Healthcare compiles the top architects based on the dollar volume of healthcare construction projects completed during the prior calendar year. Healthcare represented over 90% of MKM's work again in 2012.

MKM architecture + design is an award-winning design firm dedicated to community health and wellness. For more information, visit www.MKMdesign.com or call us at 260-422-0783.

Join our GLACHE LinkedIn Group!

We will be using this group to communicate on upcoming educational seminars and other networking opportunities.

GVSU HPGSA Facebook Connection

<https://www.facebook.com/#!/pages/Healthcare-Professionals-Graduate-Student-Alliance/252539474779235>

Great Lakes Chapter of the American College of Healthcare Executives

2013 Board Members

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ACHE Vision Statement: Be the premier professional society for healthcare executive dedicated to improving healthcare delivery.

ACHE Mission Statement: To advance our members and healthcare management excellence.

This newsletter is assembled and published by:
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